



## IN KIND GRANT APPLICATION FOR 2021

**DEADLINE: WEDNESDAY, AUGUST 12, 2020 at NOON**

ORGANIZATION NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

EXECUTIVE DIRECTOR/ADMINISTRATOR: \_\_\_\_\_

EXECUTIVE DIRECTOR/ADMINISTRATOR E-MAIL: \_\_\_\_\_

GRANT CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_ WEB ADDRESS: \_\_\_\_\_

IRS 501(c)(3) #: \_\_\_\_\_ COLORADO CHARITABLE SOLICITATIONS #: \_\_\_\_\_  
(Registration numbers do not apply to Summit School District or government agencies)

GRANT APPLICATION WRITTEN BY: ☐ Volunteer ☐ Paid Staff ☐ Paid Grant Writer

IMPACT AREA *(please refer to The Summit Foundation document found in the Guidelines document):*

- ☐ **Community Enrichment** | Focus: *Access to Arts and Culture*
- ☐ **Healthy & Safe Communities** | Focus: *Access to Affordable and Quality Healthcare and Supportive Services*
- ☐ **Bright Futures** | Focus: *Succeed in Education and Life*
- ☐ **Environmental Stewardship** | Focus: *Preserve the Natural Beauty of Our Community*

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

I. AGENCY INFORMATION – Briefly describe:

A. The mission of the organization:

B. The history of the organization:

C. Current programs and accomplishments (numbers served, events held, services provided, etc.):

D. Please list the Board of Trustees/Directors, and occupation of each member:

E. Revenue and expense summary for the entire organization:

**2019 Actual Operating**

**Revenue** \_\_\_\_\_

**2019 Actual Operating Expenses** \_\_\_\_\_

**2020 Estimated Revenue** \_\_\_\_\_

**2020 Estimated Expenses** \_\_\_\_\_

**2021 Projected Operating Revenue** \_\_\_\_\_

**2021 Projected Operating Expenses** \_\_\_\_\_

F. **This applies only to first time (new)** applying organizations OR if your IRS nonprofit status has changed. Please attach your organization's 501(c)(3) IRS determination letter.

II. PURPOSE OF GRANT

A. What is your In-Kind request(s)? Please be as specific as possible (*i.e. what, when, for how many days/hours, etc.*).

B. For what project/program are you making these requests? Please describe the project/program if applicable.

C. How does this project/program benefit the local community? If available, provide data or research that supports your request.

III. EVALUATION

A. How will you measure the impact of the project/program?

B. If you received an in-kind service in the past calendar year, please briefly describe how your organization has used these services, and to what extent you have reached your goals as outlined in the original grant application(s).